

Page 1 2004

**Form 2A****MONTANA**

Last Name and Initial

Social Security Number

**Schedule I — Itemized Deductions**Column A (For  
single, joint,  
separate or head  
of household)Column B (For  
spouse only when  
filing separate, and  
box 3 is checked)

70. Medical insurance premiums not deducted on lines 19, 35 or 74.....70.  
Do not include pre-tax payroll deductions or employer paid premiums.

Column A Column B

71. Medical expenses. See instructions.....71.

72. Enter 7.5% (.075) of line 38, Form 2.....72.

73. Subtract line 72 from line 71. If less than zero, enter zero.

Deductible medical and dental expenses.....73.

74. Long term care insurance.....74.

Federal Income Tax (Amounts attributable  
to self employment tax are not deductible)

Column A Column B

75. 2004 federal tax withheld from wages, pensions  
and annuities. Attach W-2's and 1099's.....75.76. Federal estimated tax payments made in 2004.  
Attach copies of pages 1 and 2 of federal  
tax return (Form 1040 or 1040A).....76.

77. Balance of 2003 tax paid in 2004.....77.

78. Additional federal tax for year(s) paid in 2004.78.

79. Total 2004 federal tax deduction - add lines 75, 76, 77, and 78 ....79.

80. Real estate personal property taxes.....80.

81. Motor vehicle(s) taxes, other deductible taxes.....81.

82. Home mortgage interest..... Deductible points.....  
If paid to the person from whom you bought the home, please provide  
person's name, address and social security #.....

82. ....82.

83. Deductible investment interest .....Attach Federal Form 4952 83.

84. Contributions .....84.

85. Child and dependent care expense ...Attach Montana Form 2441M 85.

86. Casualty and theft losses.....Attach Federal Form 4684 86.

87. Unreimbursed employee business expense

Attach Federal Form 2106.....87.

88. Other expenses (list type and amount).....88.

89. Add lines 87 and 88.....89.

90. Enter 2% (.02) of line 38 Form 2.....90.

91. Subtract line 90 from 89. If less than zero,  
enter zero.....91.

92. Misc. deduction not subject to 2% A.G.I. (list type and amount) 92.

93. ....93.

93. Gambling losses (as allowed by federal law).....93.

94a. Add lines 70, 73, 74, 79-86, 91-93. Enter result here.....Total 94a

If the amount on Form 2, line 38 is more than \$142,700  
(more than \$71,350 if you are married filing separately)  
continue to line 94b, otherwise transfer the amount on  
line 94a to line 39 of Form 2.

94b. Enter the amount from line 9 of the Itemized Deduction  
Worksheet VI on page 14. This is the amount of your unallowable  
itemized deductions.....94b.

95. Subtract line 94b from line 94a. This is the amount of your  
allowable itemized deductions. Enter here and on  
line 39 of Form 2.....Total 95.

**Round to nearest dollar**Medical & Dental  
ExpensesTaxes You  
PaidInterest You  
Paid

Other

Miscellaneous  
DeductionsTotal  
Deductions

**When you file your Montana income tax return electronically you represent that you have retained all documents required as a tax record and that you will provide a copy to the department upon request.**